



**WOLFF LAW OFFICES, PLLC - FILING RECORD**

Attorney Docket No.: **Legare-PAUS0004**  
Today's Date: August 10, 2009  
Attorney: Kevin A. Wolff  
Fee Transmitted Herewith: \$0  
Serial No.: **10/657,188**  
Filing Date: September 9, 2003  
Title: CONTROL METHODS FOR IMPROVED CATALYTIC  
CONVERTER EFFICIENCY AND DIAGNOSIS  
Inventors: Joseph E. Legare

VIA HAND DELIVERY

**THE USPTO DATE STAMP HEREON ACKNOWLEDGES RECEIPT OF:**

**DOCUMENTS BEING FILED:**

- 1) Transmittal Form
- 2) Response (to the Election/Restriction Office Action dated 7/09/2009)
- 3) Copy of Examiner Interview Summary dated August 4, 2009



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number

10/657,188

Filing Date

09/09/2003

First Named Inventor

Joseph E. Legare

Art Unit

3748

Examiner Name

Tu Minh Nguyen


Attorney Docket Number

Legare-PAUS0004

**ENCLOSURES (Check all that apply)**


<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Filing Record;
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Copy of Examiner Interview Summary dated August 4, 2009
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Wolff Law Offices, PLLC, P.O. Box 9855., Chapel Hill, NC 27515-9855		
Signature	/Kevin Alan Wolff/ 		
Printed name	Kevin Alan Wolff		
Date	8/10/2009	Reg. No.	42,233

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature	/Kevin Alan Wolff/ 		
Typed or printed name	Kevin Alan Wolff	Date	8/10/2009

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